

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>C.B.</i>	<i>664461</i>	<i>1/26/99</i>
O.I.P.E. CLASSIFIER		<i>19</i>	<i>2/1/99</i>
FORMALITY REVIEW	<i>N.M.</i>	<i>71629</i>	<i>2-3-99</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	<i>4/16/01</i>
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Claim	Date
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here